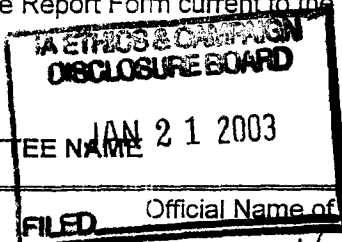


FOR INSTRUCTIONS, SEE BACK OF FORM  
This form is not applicable to statutory political committees.

## Notice of Dissolution

Every Notice of Dissolution shall be accompanied by a completed Disclosure Report Form current to the date of dissolution.



CO VIMITTEE NAME

Official Name of Committee

Elect Gordon Greene Plymouth Sup.	
Street	
50	12 <sup>th</sup> St SW
City, State, Zip Code	
Le Mars Iowa 51031	712-5466532
Area Code	Telephone
(712) 546-6532	

Effective date of dissolution:

\_\_\_\_\_, 20\_\_\_\_

Donna Mae Greene

Signature of Treasurer

1/16/03

Date Signed

### THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

I, the candidate, certify that my candidate committee's cash balance is zero, all debts, obligations and loans have been paid or satisfied in accordance with law as shown on my committee's final report and all campaign property and leftover funds have been distributed in accordance with my committee's last filed Statement of Organization.

Gordon Greene

Signature of Candidate - Required for Candidate's Committee

1/16/03

Date signed

### WHEN TO FILE:

The Notice of Dissolution must be filed within thirty (30) days of the committee's dissolution, with a copy of the final bank statement attached.

FORM

(Rev. 02/96)

*Plymouth*

DR-3

NOTICE OF  
DISSOLUTION

### For Office Use Only

Comm. #

17314

Indexed sb

Audited

Computer

Certified Date of Dissolution